Attorney Docket No. SURGEX- 1

DECLARATION AND POWER OF ATTORNEY

(Patent, Design or C-I-P Application)

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are stated below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: SYSTEM

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AND:	MET	HOD	FO	RI	FILTE	RING I	MULTI	PLE A	ADV	ERSE	CHA	RA	CTER	USTI	CS:	FRO	M A	PO	WE	R SUI	PLY	

the specification of which	i e		
X is attached hereto			
was filed on	as Application Serial No.	and was amended on	 (if applicable)

I hereby state that I have reviewed and understand the contents of the above-entitled specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

		PRIOR FOREIGN APPL	ICATION(S)	
n T	COUNTRY	APPLICATION NO.	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 U.S.C. 119
				YES NO

ESTING OF FOREIGN APPLICATIONS CONTINUED ON PAGE 2 HEREOF: YES ___ NO _X

Thereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first page of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Gode of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

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5 D D S A E		
Application No.	Filing Date	Status

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

ERIC A. LaMORTE, Reg. No. 34,653; MARY ALICE McMONAGLE, Reg. No. 41,187								
P.O. BO	TE & ASSOCIATES, P.C.		DIRECT TELE CALLS TO:	PHONE Eric A. LaMorte. Esq. (215) 321-6772				
FULL NAME OF INVENTOR #1	LAST NAME: McCOOK	FIRST NAME: MICHAEL		MIDDLE INITIAL:				
RESIDENCE & CITIZENSHIP	CITY: NEW HOPE	STATE OR FOREIGN COUNTRY: PENNSYLVANIA		COUNTRY OF CITIZENSHIP: USA				
POST OFFICE ADDRESS	POST OFFICE ADDRESS: 2744 NORTH SUGAN ROAD	CITY: NEW HOPE		STATE AND ZIP CODE: PENNSYLVANIA 18938				
FULL NAME OF INVENTOR #2	LAST NAME: BENTON	FIRST NAME: ANDREW		MIDDLE NAME:				
RESIDENCE & CITIZENSHIP	CITY: FLEMINGTON	STATE OR FOREIG NEW JE		COUNTRY OF CITIZENSHIP: UNITED KINGDOM				
POST OFFICE ADDRESS	POST OFFICE ADDRESS: 124 THATCHERS HILL ROAD	CITY: FLEMINGTO	N	STATE AND ZIP CODE: NEW JERSEY 08822				
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LISTING OF INVENTORS CONTINUED ON PAGE 2 HEREOF: YES ____ NO _X

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Signature of Inventor #1	Signature of Inventor #2	Signature of Inventor #3
Date: 1-4-02	Date: 1-4-02	Date: